

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D		9/7/99
O.I.P.E. CLASSIFIER	AW	32	9/7/99
FORMALITY REVIEW	AW	32	9/7/99

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1 ✓ 9/7/99	
2 ✓ 9/7/99	
3 ✓ 9/7/99	
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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